

Applicant's Name

Position:

Home Site:

CREDENTIALLING AND DEFINING SCOPE OF CLINICAL PRACTICE

PAEDIATRIC RENAL & CONTINENCE UNIT

PLEASE NOTE: Monash Health acknowledges that occasions may arise where the emergency needs of a patient require a procedure to be undertaken which falls outside the scope of clinical practice authorised for the practitioner concerned. Monash Health will support members of the Senior Medical Staff who are required to so act

Core Services:

Please indicate (with a ✓) those procedures you wish to undertake on a site by site basis	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Inpatient Services	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Outpatient Services	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Research	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Supervision	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Other Services	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA

Core Procedures:

Please indicate (with a ✓) those procedures you wish to undertake on a site by site basis	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Closed renal biopsy under ultrasound guidance	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Peritoneal dialysis of children and infants	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Haemodialysis of children and infants	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Plasma exchange of children and infants	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Medical management of renal transplantation of children & infants	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Medical management of chronic renal failure of children & infants	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Interpretation of Uroflows and bladder scan results	<input type="checkbox"/>	NA	NA	NA	NA	<input type="checkbox"/>	NA

Applicant's Name		Position:		Home Site:	
------------------	--	-----------	--	------------	--

Additional Procedures:

Please indicate any additional or specific sub-specialty procedures (i.e. not included in the 'core') you wish to undertake on a site by site basis.	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sign-off

Applicant's Name:		Signature:		Date:	
Reviewed & Approved by Dept. Head:		Signature:		Date:	
Reviewed & Approved by PMD:		Signature:		Date:	
Approved by CMO:		Signature:		Date:	